## INSTRUCTIONS FOR CALCULATING FACILITY FEES FOR

## SARA TITLE III, TOXIC RELEASE INVENTORY (TRI) SECTION 313 REPORTING

- 1. You must use a separate fee form for each facility;
- 2. The fee form is available on-line at: www.state.sd.us/titleiii;
- 3. The fee for a facility is calculated on a per-chemical basis;
- 4. Enter each chemical name/category, CAS Number/Category Code, and pounds released into the table on the form;
- 5. If you run out of room in the table on the fee form, attach an additional page (an additional page is available on-line at <a href="https://www.state.sd.us/titleiii">www.state.sd.us/titleiii</a>);
- 6. Use the table below to calculate the fee for each chemical:
  - Note the fee for any chemical PROPERLY reported on a form A is \$250.00;
  - Note that there is a fee for each TRI reportable chemical/category even if the release amount is zero (\$250.00 fee);
  - The pounds released equals the total of all on-site releases to air, water, land, and underground injection plus any amounts transferred off-site for disposal or treatment. This includes amounts sent to the local wastewater plant or landfill. Because we encourage recycling activities, we do not require that you consider pounds transferred off-site for recycling or energy recovery.

Pounds Released		<u>Fee</u>	
0 - 9,999	\$	250	
10,000 - 19,999	\$	350	
20,000 - 29,999	\$	450	
30,000 - 39,999	\$	550	
40,000 - 49,999	\$	650	
50,000 - 74,999	\$	800	
75,000 - 99,999	\$1	,000	
100,000 - 249,999	\$1	,300	
250,000 - 499,999	\$1	,600	
500,000 - 749,999	\$2	2,000	
750,000 - 999,999	\$2	2,500	
1,000,000 +	\$3	3,000	

- 7. Calculate the total (add the fees for each chemical to come up with the total for your facility);
- 8. Determine the total fee due (the lesser of your total from above or \$3,000 the maximum fee per facility is \$3,000);
- 9. Sign and date the form;
- 10. Make your check payable to "DENR Title III" and forward it, along with one copy of the fee form, to:

SD Department of Revenue Post Office Box 5055 Sioux Falls, SD 57117-5055

- 11. Keep one copy of the fee form for your records; and
- 12. For additional assistance or information, contact Trish Kindt via e-mail at <a href="mailto:Trish.Kindt@state.sd.us">Trish.Kindt@state.sd.us</a> or by calling 800-433-2288.



## **SARA TITLE III** TOXIC RELEASE INVENTORY (TRI) SECTION 313 FEE PAYMENT FORM

Facility Name: (You must use a separate fee for	rm for each facility)			
Facility TRI ID Number:				
Mailing Address:				
City		State	Zip	
Actual Facility Location:				
Phone Number:				
Chemical Nan	ne	CAS Number	Pounds Emitted	Fee Owed
		Total from above (and from	om any additional pages):	
(Enter the I	esser of your tota	al from above or \$3,000	Total Fee Due:  – the maximum fee per fac	cility is \$3,000)
(Attach additional pages if this table is a large of law that I have been also additional pages if this table is a large of law that I have been added to the large of large o	at I have reviewed	I the above information,	that it is true and correct to	
Type or Print Name and Job Title	<del></del>			
Signature			Date	
<ul> <li>Make checks payable to "D</li> <li>Mail your check along with</li> </ul>		form to: SD De	epartment of Revenue	

Keep one copy of this form for your records. If you wish to pay by electronic funds transfer rather than by check, contact Trish Kindt (e-mail at Trish.Kindt@state.sd.us or call 800-433-2288).

Post Office Box 5055 Sioux Falls, SD 57117-5055



## SARA TITLE III TOXIC RELEASE INVENTORY (TRI) SECTION 313 FEE PAYMENT FORM

acility Name:  /ou must use a separate fee form for each facility)						
Phone Number:						

Total: